

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449/PTO				Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)				Application Number	09/402,820-Conf. #6495
				Filing Date	October 12, 1999
				First Named Inventor	Daniel G. Chain
				Art Unit	1645
				Examiner Name	P. A. Duffy
Sheet	2	of	2	Attorney Docket Number	20555/1203301-US1

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	CA	SOLOMON, B., Immunological Concepts in the Treatment of Alzheimer's Disease, <i>Drug Dev. Res.</i> 56:163-167 (2002)	
	CB	SOLOMON, B., Immunotherapeutic Strategies for Prevention and Treatment of Alzheimer's Disease, <i>DNA and Cell Biol.</i> 20:697-703 (2001)	
	CC	FRENKEL et al., N-terminal EFRH of Alzheimer's β -amyloid Peptide Represents the Epitope of its Anti-aggregating Antibodies, <i>J. Neuroimmunol.</i> 88:85-90 (1998).	

Examiner Signature	/Patricia Duffy/	Date Considered	12/17/2008
-----------------------	------------------	--------------------	------------

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹Applicant's unique citation designation number (optional). ²Applicant is to place a check mark here if English language Translation is attached.

ALL REFERENCES CONSIDERED EXCEPT WHERE LINED THROUGH. /P.D./